



# COMPLAINTS, GRIEVANCE & FEEDBACK LODGEMENT FORM



Early Years Care

Early Years Care welcomes your feedback, questions, comments, and grievance / complaints about any aspect of our Service. Parental and community engagement, both positive and negative, are viewed as opportunities for critical reflection and driving quality improvement. Any concerns or issues raised will be handled promptly and professionally by the Management Team.

Please refer to our service policies and procedures for further information about the steps which will be taken to acknowledge, address and seek a resolution.

Management requests you provide your feedback, questions, comments, and complaints in writing, addressed to the Approved Provider -Marie Armstrong via email to [marie@earlyyearscares.com.au](mailto:marie@earlyyearscares.com.au)

<b>NAME:</b>		<b>CHILD/S NAME:</b>	
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b>	
<p><b>WOULD YOU PREFER AN IN-PERSON MEETING OR PHONE CONTACT FOR PRELIMINARY DISCUSSIONS?</b></p> <p><input type="checkbox"/> Meeting   <input type="checkbox"/> Phone Contact   <b>PLEASE SPECIFY</b> Most suitable day &amp; time to call / meet _____</p> <p><i>NB: a suitable time and place will need to be organised to discuss the issue and reach a resolution</i></p>			

**SPECIFIC COMPLAINT / GRIEVANCE/ FEEDBACK DETAILS** [please be specific and detailed in this section describing what and when the situation occurred (attach additional pages as required)]

*Is this the result of an action/decision of an educator/staff member; the health, safety, or wellbeing of your child/ren; the Service's response to an accident/incident? Have any steps been taken to resolve the situation?*



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HAVE YOU RAISED THIS MATTER IN PERSON WITH AN EDUCATOR OR MEMBER OF THE MANAGEMENT TEAM BEFORE?

YES  NO If YES, what was the outcome from your discussion?

DO YOU HAVE ANY STRATEGIES OR SOLUTIONS THAT YOU FEEL COULD BE PUT IN PLACE TO RESOLVE YOUR ISSUE/S?

For example, are you seeking an apology, additional information, policy or procedural review or change, an explanation to understand what has occurred, feedback?

<b>SIGNATURE:</b>		<b>DATE:</b>	
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**CONFIDENTIALITY NOTICE**

*Your personal information will remain confidential and only disclosed as permitted under relevant privacy laws. If the information you have provided is related to a serious incident or matter of fraud, the Approved Provider will be provided to the Regulatory Authority and other Government agencies if required.*

**OFFICE USE:**

<b>RECEIVED DATE:</b>		<b>RECEIVED VIA:</b>	<b>EMAIL</b> _____	<b>WRITING</b> _____
<b>PRELIMINARY INVESTIGATION DATE WITH COMPLAINANT:</b>				
<b>PRELIMINARY INVESTIGATION DATE WITH IDENTIFIED PARTIES:</b>				
<b>NOTIFICATION REQUIRED TO THE REGULATORY AUTHORITY?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO				
If YES, provide specific details				
<b>OUTCOME:</b>				